FACILITY NAME		Evergreen Recycling a	and Disposal Facility
FACILITY ID (PREMISE NU	JMBER)	03-87-00-0259	<u> </u>
FACILITY ADDRESS		2625 East Broadway, I	Northwood, OH 43619
Issuance or most recent mo	dification date	05/21/13 (Effective Dat	te 06/11/13)
QUARTERLY Reporting Pe	riod	SEMIANNUAL Reportir "From" and "To" fields if reporting)	ng Period (please indicate "N/A" below in the this report does not include semiannual deviation
From: 01/01/15	To: 03/31/15	From: N/A	To: N/A
Total pages in <u>report,</u> includ	ling this one (signature page and sections I,	12	
Please list any supporting a	ttachments	I	
Reporting deadline		04/30/15	-

NOTE: The deviation reporting period shall be stated in the following format: "xx/xx/xx through zz/zz/zz" where xx/xx/xx and zz/zz/zz are the beginning and end dates for the deviation reporting period respectively.

SIGNATURE FOR STATEMENT

This statement shall be signed by the responsible official as defined in OAC rule 3745-77-01(GG). Making of any false material statement, representation or certification constitutes a violation of ORC 3704.05(H), and subjects the responsible party signing this statement to civil and/or criminal penalties as provided in ORC 3704.06(C) and ORC 3704.

CERTIFICATION

Based on information and belief formed after reasonable inquiry, I hereby affirm, as stated in OAC rule 3745-77-03(D), that the statements and information as transmitted in this Title V report are true, accurate and complete to the best of my knowledge.

Authorized Signature	Submitted through O	<u>hio EPA e-Bu</u>	siness Center	
Name (Please Print) _	Steve Lonneman	Title	Senior District M	lanager

FACILITY ID (PREMISE NUMBER): 03-87-00-0259

Section I - PART A General Terms and Conditions (Permit Requirement Reporting)

Table 1 – Negative Declarations

Mark the following box with an 'X' if no General Terms and Conditions deviations occurred



THERE WERE NO DEVIATIONS OF ANY OF THE TERMS AND CONDITIONS OF PART I/PART A OF THE TITLE V PERMIT DURING THE REPORTING PERIOD

Table 2 - Deviation Reporting

Add rows as necessary to the following table for reported deviations (one for each General Term as applicable; see detailed instructions for more information)

TITLE V PERMIT TERM		orting ement e one)	ACTUAL METHOD USED TO DETERMINE		DEVIATIO INFORMAT		PROBABLE CAUSE FOR THE	CORRECTIVE ACTIONS / PREVENTATIVE
NO. / Description			COMPLIANCE		ATION ATION	DESCRIPTION AND MAGNITUDE OF THE	DEVIATION	MEASURES TAKEN
	Quarterly	Semi- Annual		DATE / TIME START	DATE / TIME END	DEVIATION		

FACILITY ID (PREMISE NUMBER): 03-87-00-0259

Section II - PART B Facility-wide Permit Requirement Reporting

Table 1 - Insignificant Emissions Unit Negative Declarations

List each insignificant emissions unit where no deviations of any PTI terms or applicable requirements for the listed emissions unit occurred, or add rows as necessary to the deviation reporting table (see next page) for reported deviations (one for each term as applicable; see detailed instructions for more information)

THERE WERE NO DEVIATIONS OF ANY PTI TERMS OR APPLICABLE REQUIREMENTS FOR THE FOLLOWING LISTED INSIGNIFICANT EMISSIONS UNITS IDENTIFIED IN Part B.7 OF THE TITLE V PERMIT DATED MAY 21, 2013:					
G010 – 550-gallon Gasoline Storage Tank and Dispensing	L001 – 30-gallon Solvent Parts Degreaser				

Table 2 - Terms and Conditions - Negative Declarations

Mark the following box with an "X" if no General Terms and Conditions deviations occurred

X

THERE WERE NO DEVIATIONS OF ANY OF THE TERMS AND CONDITIONS OF PART B OF THE TITLE V PERMIT DURING THE REPORTING PERIOD SPECIFIED IN THIS REPORT

Table 3 - Facility-wide and/or IEU permit requirement - Deviation Reporting

Add rows as necessary to the following table for reported deviations (one for each Term as applicable; see detailed instructions for more information)

TITLE V or IEU PERMIT TERM	Report Requires (choose	rting ement	ACTUAL METHOD USED TO DETERMINE		DEVIA INFORM	TION	PROBABLE CAUSE FOR THE	CORRECTIVE ACTIONS / PREVENTATIVE	WAS THIS DEVIATION ATTRIBUTABLE	MALFU REPO	UNCTION ORT(S) TE(S)
NO. / Description or PTI terms	or bo	,	COMPLIANCE		ATION	DESCRIPTION AND MAGNITUDE	DEVIATION	MEASURES TAKEN	TO A MALFUNCTION? (Yes or No - If Yes, continue to the next	state "NO F	s were made, REPORTS" in ce below)
for IEUs	Quarterly	Semi- Annual		DATE / TIME START	DATE / TIME END	OF THE DEVIATION			column)	VERBAL	WRITTEN

FACILITY ID (PREMISE NUMBER): 03-87-00-0259

Section III - PART C Emissions Unit Terms and Conditions (Permit Requirement Reporting)

Table 1 – Negative Declarations

List each emissions unit where no deviations of any terms for the listed emissions unit occurred, <u>or</u> add rows as necessary to the second table (see next page) for reported deviations (one for each term as applicable; see detailed instructions for more information)

THERE WERE NO DEVIATIONS OF <u>ANY</u> OF FOLLOWING LISTED EMISSIONS UNITS:	F THE TERMS AND CONDITIONS OF PART III/F	PART C OF THE TITLE V PERMIT FOR THE
Emissions Unit ID	Please place an 'X' below if there were no Quarterly Deviations - If an 'X' is not indicated, the deviation(s) must be identified in Table 2 below	If applicable, please place an 'X' below if there were no Semiannual Deviations - If an 'X' is not indicated, the deviation(s) must be identified in Table 2 below
F005	X	N/A
P901		N/A

Table 2 - Deviation Reporting

Add rows as necessary to the following table for reported deviations (one for each Term as applicable; see detailed instructions for more information) - Please

group deviations for each emissions unit that has deviations of multiple terms.

TITLE V or IEU PERMIT TERM NO. /	Repo Require (choos or b	em ent e one)	ACTUAL METHOD USED TO DETERMINE		DEVIATION INFORMATIO	N	PROBABLE CAUSE FOR THE	CORRECTIVE ACTIONS / PREVENTATIVE	WAS THIS DEVIATION ATTRIBUTABLE	MALFUN REPOI DATE	RT(S)
Description or PTI terms for IEUs	01.0	Otti	COMPLIANCE		ATION ATION	DESCRIPTION AND MAGNITUDE	DEVIATION	MEASURES TAKEN	TO A MALFUNCTION? (Yes or No - If	(If no reports state "NO RE the space	EPORTS" in
IOT IEOS	Quarterly	Semi- Annual		Date / Time Start	Date / Time Start	OF THE DEVIATION		K .	Yes, continue to the next column)	VERBAL	WRITTEN
P901 C.2.c)(2)	Х			REFER TO	ATTACHED	DEVIATION	REPORT				
			M. 4 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4								

See page 3 of the instructions "SECTION III ADDITIONAL DETAILED INSTRUCTIONS FOR COMPLETING A DEVIATION REPORTING TABLE" for guidance on this table

FACILITY ID (PREMISE NUMBER): 03-87-00-0259

Detailed Quarterly Deviation Report

Unit ID P901:

C.3.c)(1) and (2) (Pressure, Temperature, and Oxygen Operational Restrictions)

Following are documented exceedances of pressure, temperature, and oxygen (greater than 15 days) for the above stated QUARTERLY time period.

Note: 40 CFR 60 Subpart WWW allows short duration exceedances to occur (corrected in less than 15 days) without requiring expansion of the well field. These short-term exceedances are not individually listed here. Well field monitoring data is maintained in Evergreen files.

Corrective actions were initiated at the wells. Wells were re-monitored within 15 days (except as noted below) to determine whether additional corrective actions were necessary to achieve proper parameter ranges. Exceedances greater than 15 days are noted below. Refer to Attachment I for more details.

Pressure:

40 CFR 60.753(b) - Pressure Exceedances: Several wells exhibited pressure exceedances during the reporting period. All wells returned to allowable operating range within 15 days of the first exceedance measurement.

Well ID/Month/Total days

NONE

Oxygen:

40 CFR 60.753(c) – Oxygen Exceedances: Several wells exhibited oxygen exceedances during the reporting period. All wells returned to allowable operating range within 15 days of the first exceedance measurement, except for the well listed below.

Well ID/Month/Total days

EVGELCRL (December 17, 2014 – end of reporting period): EVGELCRL was installed in December 2014 to control odors. After the initial reading, it was determined that the connection was made into the large leachate collection riser pipe instead of a smaller 6-inch pipe. The device was immediately shut off by closing the valve. The facility intends to change the connection from the larger pipe to the smaller pipe when weather permits. An Alternative Timeline Request was submitted to the Ohio EPA on December 30, 2014.

EVGNEW28 (November 21, 2014 – end of reporting period; 129 days as of end of reporting period): Corrective action initiated within 5 days by adjusting the pressure at the wellhead. Evergreen submitted an Alternative Timeline Request to the OEPA on December 4, 2014 requesting additional time to remove accumulated liquids or abandon the well. The Alternative Timeline Request was approved by the OEPA on December 16, 2014. The well is watered in and additional investigation showed there is a sag in the lateral line, which is also watered in. The lateral line is about

EACH INCAMAN	
FACILITY NAME: EVERGREEN RECYCLING & DISPOSAL FACILITY	FACILITY ID (PREMISE NUMBER): 03-87-00-0250
	(NEWIGE NOWBER), 03-87-00-0259

12-feet below grade and is located in an area of final grade. Based on the results of the investigation, Evergreen decommissioned the well. An Intent to Decommission Notice for the well was submitted on April 3, 2015.

End Quarterly Deviation Reporting Section

FACILITY ID (PREMISE NUMBER): 03-87-00-0259

PART C - Emission Unit Specific Reporting Requirements

Unit ID F005:

C.1.e)(1):

Requires this facility to submit quarterly deviation (excursion) reports that identify any of the following occurrences: a. each day during which an inspection was not performed by the required frequency, excluding an inspection which was not performed due to an exemption for snow and/or ice cover or precipitation; b. each instance when a control measure, that was to be implemented as a result of an inspection, was not implemented. The quarterly deviation (excursion) reports shall be submitted in accordance with the reporting requirements of the Standard Terms and Conditions of this permit.

> There were no instances where a control measure was not implemented when required by an inspection.

C.1.e)(2):

Requires this facility to submit all notifications and reports through the Ohio EPA's eBusiness Center: Air Services online web portal unless other arrangements have been approved by the Director.

> All notifications and reports are submitted through Ohio EPA's eBusiness Center.

Unit ID P901:

C.2.e)(1):

Requires this facility to submit a closure report to the Division of Air Pollution Control at the appropriate Ohio EPA office of jurisdiction, within 30 days of waste acceptance cessation.

> Not applicable during this reporting period. Facility is still open and receiving wastes for disposal.

C.2.e)(2):

Requires this facility to submit to the Director reports of the recorded information in e)(2)a. through e)(2)f. For flares, reportable exceedances are defined under d)(3). The report shall be submitted by January 31 and July 31 of each year and shall cover the previous six calendar months.

FACILITY ID (PREMISE NUMBER): 03-87-00-0259

- a. Value and length of time for each exceedance of the applicable parameters monitored under d)(1).
 - ➤ The 2nd 2014 semi-annual report was submitted under separate cover via e-business on January 26, 2015.
- b. Description and duration of all periods when the gas stream is diverted from the control device through a bypass line or the indication of bypass flow as specified under d)(3).
 - > The 2nd 2014 semi-annual report was submitted under separate cover via e-business on January 26, 2015.
- c. Description and duration of all periods when the control device was not operating for a period exceeding 1 hour and length of time the control device was not operating.
 - > The 2nd 2014 semi-annual report was submitted under separate cover via e-business on January 26, 2015.
- d. All periods when the collection system was not operating in excess of 5 days.
 - > The 2nd 2014 semi-annual report was submitted under separate cover via e-business on January 26, 2015.
- e. The location of each exceedance of the 500 ppm methane concentration as provided in c)(3), and the concentration recorded at each location, for which an exceedance was recorded in the previous month.
 - > The 1st quarter 2015 SEM event was completed on March 25 and 27, 2015. There were zero (0) locations that showed elevated methane concentrations of 500 ppm above background methane concentration.
- f. The date of installation and the location of each well or collection system expansion added.
 - > The 2nd 2014 semi-annual report was submitted under separate cover via e-business on January 26, 2015.

C.2.e)(3):

Requires this facility to report any breakdown or malfunction of the landfill gas collection and control system resulting in the emission of raw landfill gas emissions to the atmosphere to the Northwest District Office within one hour after the occurrence, or as soon reasonably possible, and immediate remedial measures shall be undertaken to correct the problem and prevent further emissions to the atmosphere.

During the reporting period, there were no breakdowns or malfunctions of the landfill gas collection and control system that resulted in the emission of raw LFG to the atmosphere.

C.2.e)(4):

Requires this facility to submit quarterly reports summarizing the asbestos disposal activities. The reports shall contain the following information. These quarterly reports shall be submitted no later than January 31, April 30, July 31, and October 31 and shall cover the previous calendar quarters.

FACILITY ID (PREMISE NUMBER): 03-87-00-0259

a. The name, address, and location of the facility; the calendar period covered by the report; and any changes in the methods of storage or the disposal operations.

Methods:

There were no changes in the methods of storage during this reporting period.

Disposal Operations: There were no changes in the methods of disposal during this reporting period.

b. A list of all asbestos-containing waste consignments received, including the date received, the name of the waste generator, the name and location of the facility where the load originated, the quantity of asbestos, and any discrepancy or non-conformity discovered.

In 1st Quarter 2015, the facility received a total of 480.0 cubic yards of asbestos. The summary for asbestos received during the reporting period is as follows:

For the period of January 1 through March 31 2015.

Date of	Generator Name	Location from which	Volume
<u>Dispo</u> sal	and Contractor	Asbestos was removed	
1.20.15	Total Environmental Total Environmental	1950 Clinton Street-various locations Toledo, Ohio 43607	30.00 CY
1.20.15	Total Environmental Total Environmental	1950 Clinton Street-various locations Toledo, Ohio 43607	30.00 CY
1.20.15	Total Environmental Total Environmental	1950 Clinton Street-various locations Toledo, Ohio 43607	30.00 CY
1.30.15	Ford Motor Rand Environmental Services	1155 Bible Rd. Lima, Ohio 45801	20.00 CY
1.30.15	Ford Motor Rand Environmental Services	1155 Bible Rd. Lima, Ohio 45801	20.00 CY

FACILITY ID (PREMISE NUMBER): 03-87-00-0259

Date of Disposal	Generator Name and Contractor	Location from which Asbestos was removed	Volume		
	and Contractor	Aspestos was removed			
2.6.15	Total Environmental Total Environmental	1950 Clinton Street-various locations Toledo, Ohio 43607	30.00	CY	
2.12.15	Ford Motor Rand Environmental Services	1155 Bible Rd. Lima, Ohio 45801	20.00	CY	
2.12.15	Ford Motor Rand Environmental Services	1155 Bible Rd. Lima, Ohio 45801	20.00	CY	
2.17.15	Total Environmental Total Environmental	1950 Clinton Street-various locations Toledo, Ohio 43607	30.00	CY	
2.17.15	Total Environmental Total Environmental	1950 Clinton Street-various locations Toledo, Ohio 43607	30.00	CY	
2.25.15	Total Environmental Total Environmental	1950 Clinton Street-various locations Toledo, Ohio 43607	30.00	CY	
3.12.15	Total Environmental Total Environmental	1950 Clinton Street-various locations Toledo, Ohio 43607	30.00	CY	
3.18.15	Botkins High School Total Environmental	208 N. Sycamore St. Botkins, Ohio 43506	30.00	CY	
3.18.15	Total Environmental Total Environmental	1950 Clinton Street-various locations Toledo, Ohio 43607 Page 10 of 12	30.00	CY	

FACILITY NAME: EVERGREEN RECYCLING & DISPOSAL FACILITY	FACILITY ID (PREMISE NUMBER): 03-87-00-0259
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For the pe	riod of January 1 through March 3	1 2015.			
Date of	Generator Name	Location from which	Volume	Volume	
Disposal	and Contractor	Asbestos was removed			
3.23.15	Continental Contitech Interdyne Corporation	1115 S. Wayne Street St. Mary's Ohio 45805	20.00	CY	
3.25.15	Ford Motor Rand Environmental Services	1155 Bible Rd. Lima, Ohio 45801	20.00	CY	
3.27.15	Total Environmental Total Environmental	1950 Clinton Street-various locations Toledo, Ohio 43607	30.00	CY	
3.27.15	Total Environmental Total Environmental	936 State Route 160 Gallipolis, Ohio 45631	30.00	CY	

^{*}Additional information can be provided, upon request, for loads with various locations.

C.2.e)(5):

Requires this facility to as soon as possible and no longer than 30 days after receipt of the waste (ACM), send a copy of the signed waste shipment record to the waste generator.

> A copy of each signed waste shipment record was forwarded to each generator within 30 days after receipt of the waste.

C.2.e)(6):

Requires this facility upon discovering a discrepancy between the quantity of waste designated on a waste shipment record and the quantity actually received, the permittee shall attempt to reconcile the discrepancy with the waste generator. If the discrepancy is not resolved within 15 days after receiving the waste, immediately report in writing to the State, local, district, or U.S. EPA regional office responsible for administering the asbestos NESHAP program for the waste generator (identified in the waste shipment record), and, if different, the Northwest District Office. Describe the discrepancy and attempts to reconcile it and submit a copy of the waste shipment record along with the report.

> There were no discrepancies during the reporting period.

FACILITY ID (PREMISE NUMBER): 03-87-00-0259

C.2.e)(7):

Requires this facility to submit, upon closure of the facility, a copy of the records of the asbestos waste disposal locations and quantities.

> Not applicable during this reporting period. Facility is still open and receiving wastes for disposal.

C.2.e)(8):

Requires this facility to notify the Northwest District Office in writing at least 45 days prior to excavating or otherwise disturbing any asbestos-containing waste material that has been deposited at a waste disposal site and is covered. If the excavation will begin on a date other than the one contained in the original notice, notice of the new start date must be provided at least 10 working days before excavation begins and in no event shall the excavation begin earlier than the date specified in the original notification. The following information shall be included in the notice: a. Scheduled starting and completion dates; b. Reason for disturbing the waste; c. Procedures to be used to control emissions during the excavation, storage, transport, and ultimate disposal of the excavated asbestos-containing waste material (if deemed necessary, the Northwest District Office may require changes in the proposed emission control procedures); and d. Location of any temporary storage site and the final disposal site.

> No excavation was completed during the reporting period in areas where asbestos has been deposited.

C.2.e)(9):

Requires this facility to notify the Northwest District Office of any load of asbestos-containing material which is rejected, or any non-conforming load disposed of in accordance with the "Asbestos Spill Contingency Plan."

> No loads were rejected due to non-conformity.

C.2.e)(10):

Requires this facility to submit quarterly deviation (excursion) reports that identify any of the following occurrences: a. each day during which a fugitive dust inspection was not performed by the required frequency; and b. each instance when a control measure, that was to be performed as a result of an inspection, was not implemented. The quarterly deviation (excursion) reports shall be submitted in accordance with the reporting requirements of the Standard Terms and Conditions of this permit.

> There were no instances where a control measure was not implemented when required by an inspection.

C.2.e)(11):

Requires this facility to submit all notifications and reports through the Ohio EPA's eBusiness Center: Air Services online web portal unless other arrangements have been approved by the Director.

All notifications and reports are submitted through Ohio EPA's eBusiness Center.

ATTACHMENT I WELLFIELD EXCEEDANCE REPORT

Evergreen Recycling Disposal Facility 1st Quarter 2015 Well Exceedances

Device Name	Date/Time	O ₂ (Oxygen) (%)	Initial Static Pressure ("H ₂ O)	Adjusted Static Pressure ("H ₂ O)	Initial Temperature (°F)	Adjusted Temperature (°F)	ld Comments	Duration of Exceedance (Days)
EVGELCRL	12/17/2014 16:21	18.9	-8.8	-3.5	38	38	NSPS/EG CAI;Dec. Flow/Vac.;Fully Closed;Surging	
EVGELCRL	1/29/2015 15:08	19.1	0	0	35	35	NSPS/EG CAI;Fully Closed	An Alternative Timeline Request was submitted to the OEPA on December 30, 2014; Evergreen temporarily disconnected the collector until repairs can be made. The collector will be reconnected once repairs are
EVGETW11	3/11/2015 14:30	0	0.17	-0.12	65.6	65.8	NSPS/EG CAI;Inc. Flow/Vac.;Pump in Well	Immediate Correction Pressure
EVGEW15R	1/27/2015 15:26	20.4	-6	-6	37	37	Fully Open;NSPS/EG CAI;Check Header;Other Well Influence	
EVGEW15R	1/28/2015 11:09	20.2	-7.8	-7.8	34	35	NSPS/EG CAI;Dec. Flow/Vac.;Fully Closed;Check Header;Other Well Influence	
EVGEW15R	2/9/2015 15:14	19.7	-7	-7.1	36	32	NSPS/EG CAI;Fully Closed;No Adj. Made	
EVGEW15R	2/9/2015 15:17	19.5	-6.9	-7.1	24	24	NSPS/EG CAI;Inc. Flow/Vac.;Fully Open;Check Header;Other Well Influence	
EVGEW15R	2/25/2015 16:15	14.8	-3.4	-3.4	22	22	NSPS/EG CAI;Fully Closed;Check Header;Other Well Influence	
EVGEW15R	3/12/2015 16:46	0	-14.84	-14.97	52.2	64.4	Inc. Flow/Vac.;Surging;Other Well Influence	44 Days Oxygen; An Alternative Timeline Request was submitted on February 10, 2015.
EVGEW22R	1/27/2015 15:50	16.7	-8.7	-8.8	37	37	NSPS/EG CAI;Fully Open;Surging;Check Header	
EVGEW22R	1/28/2015 11:13	20.1	-10.2	-10.2	34	35	NSPS/EG CAI;Dec. Flow/Vac.;Fully Closed;Check Header;Other Well Influence	
EVGEW22R	2/4/2015 15:14	0	-5.9	-5.3	38	36	Barely Open;Inc. Flow/Vac.;Surging;Check Header;Other Well Influence	8 Days Oxygen
EVGEW26R	3/24/2015 11:25	8.8	-24.52	-23.1	73.3	72.7	NSPS/EG CAI;Fully Closed;Dec. Flow/Vac.;Check for Air Leaks	7 Days Oxygen as of the end of the reporting period.

Evergreen Recycling Disposal Facility 1st Quarter 2015 Well Exceedances

Device Name	Date/Time	O ₂ (Oxygen) (%)	Initial Static Pressure ("H ₂ O)	Adjusted Static Pressure ("H ₂ O)	Initial Temperature (°F)	Adjusted Temperature (°F)	ld Comments	Duration of Exceedance (Days)
EVGNEW28	11/21/2014 15:45	19.6	-33.7	-33	35	40	NSPS/EG CAI;Barely Open;Dec. Flow/Vac.;Fully Closed;Watered In	
EVGNEW28	11/25/2014 14:47	18	-18.7	-18.8	34	34	NSPS/EG CAI;Barely Open;Dec. Flow/Vac.;Fully Closed;Surging;Watered In	
EVGNEW28	12/23/2014 14:12	7	-3.9	-9.3	53	50	NSPS/EG CAI;Fully Closed;Inc. Flow/Vac.;Surging;Watered In	
EVGNEW28	12/23/2014 14:14	16	-7.3	-5.2	49	49	NSPS/EG CAI;Dec. Flow/Vac.;Fully Closed;Watered In	
EVGNEW28	1/27/2015 16:20	14.1	0	0	46	45	NSPS/EG CAI;Fully Closed;Watered In	
EVGNEW28	2/25/2015 14:07	20.3	-9.8	-1	45	45	Surging;Dec. Flow/Vac.;Fully Closed;NSPS/EG CAI;Watered In	
EVGNEW28	3/24/2015 11:11	21.4	-5.61	-5.75	36.8	37	NSPS/EG CAI;Fully Closed;Watered In	129 Days Oxygen as of the end of the reporting period; An Alternative Timeline Request was submitted to the OEPA on December 4, 2014. OEPA approved the Alternative Timeline Request on December 16, 2014. A Decommission Notification was submitted on April 3, 2015.
EVGNEW94	1/22/2015 15:41	0	3.3	-2.9	33	46	NSPS/EG CAI;inc. Flow/Vac.;Barely Open	Immediate Correction Pressure